

**Opening Statement of Rep. Henry A. Waxman
Chairman, Committee on Energy and Commerce
Making Health Care Work for American Families:
Protecting the Public Health
Subcommittee on Health
March 31, 2009**

Over the past month, we have had several hearings on health insurance and how to get it to all Americans. But as valuable as it is, health insurance can't do everything necessary to make our nation healthy. Even if we make it possible for everyone to be insured, there will still be a major role for public health. Moreover, there will be an ongoing need for funding for these public health activities.

I should begin by clarifying some basics. "Public health" includes many different things:

- It is working with groups and whole communities to improve health, often more effectively than could be done between a provider and a patient.
 - Fluoridation of water for a town is, for instance, vastly better than simply filling every citizen's cavities.
 - Exercise programs to prevent obesity are better than having to treat diabetes among people who become obese.
- It is tailoring health insurance and health care to prevent and diagnose disease early rather than simply treating it in its later stages.
 - Immunizations are always better than outbreaks.
 - Screening for hypertension is better than simply waiting for strokes.

- It is providing for safety-net services where the insurance market alone fails to do so.
 - Community health centers, HIV-service providers, and family planning clinics provide care to people who might not otherwise be able to find a provider.
 - Health professions education programs can add to the primary care workforce when the market might produce only specialists.
- And, least glamorous but crucial, it is the infrastructure of daily disease control and health promotion.
 - Closing down unsanitary restaurants is better than treating food poisoning.
 - Compiling and studying epidemic trends can prevent major waves of disease.

“Public health” is all these things and more.

It might be clearer if I use an analogy: No community would be well-served if all its homeowners had fire insurance but there were no fire departments, firefighters, fire hydrants, or smoke detectors. That very well-insured town would still burn to the ground. Insurance is necessary, but it is not sufficient.

As we approach health reform, we must consider what aspects of the nation’s health are based on public health and make those investments at the same time as we invest in coverage. We need to provide as firm a funding and organizational base for these services as we do for insurance — because they are essential in making insurance efficient and productive and in making the nation healthier.

We will continue to debate insurance plans, Medicare Advantage, Health Savings Accounts, and acute care on other days. But today’s hearing is about these public health activities that we seldom think about and we even more rarely provide for. I hope health reform will make us change that.